## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN		
TOTAL CLAIMS							RAT	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	7100	
TOTAL CHARGEABLE CLAIMS			/_Sminus 20=		*		X\$ 9	)=		OR	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*		1	X42=			X84=		
ΜU	LTIPLE DEPEN	DENT CLAIM PI	RESENT							OR			
* If the difference in column 1 is less than zero, enter "0" in column 2							+140			OR	+280=	U.S.C.S	
								<b>AL</b>		OR	TOTAL	11000	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMA	LL E	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	,	=	X\$ 9	)=		OR	X\$18=		
	Independent	*	Minus	***		=	X42	=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140	)		OR	+280=		
								TAL		OR	TOTAL		
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT.	FEE			ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	)=		OR	X\$18=		
	Independent	*	Minus	***		=	X42	:=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							)=		OR	+280=		
	•							TAL FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)									_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	)=		OR	X\$18=		
	Independent	*	Minus	***		=	X42	<u>:</u> =		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		I ├──			1		<u> </u>	
	if the entry in colu	mn 1 is less than t	the entry in col	umn 2. wri	te "0" in co	olumn 3.	+140			OR	+280=	↓	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												